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Bib Data Sheet

CONFIRMATION NO. 4450

SERIAL NUMBER 09/122,484	FILING OR 371(c) DATE 07/24/1998 RULE	CLASS XXX	GROUP ART UNIT 2614	ATTORNEY DOCKET NO.
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## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

08/12/1998

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 12
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

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## TITLE

METHOD AND SYSTEM FOR PROVIDING ENHANCED CALLER IDENTIFICATION

FILING FEE RECEIVED 5438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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